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Total Number of Pages in This Submission

2

Application Number	09/696,538
Filing Date	10/25/2000
First Named Inventor	Timothy Redpath
Art Unit	3693
Examiner Name	Dass, Harish T.

Attorney Docket Number

Attorney Docket Number

### ENCLOSURES (Check all that apply)

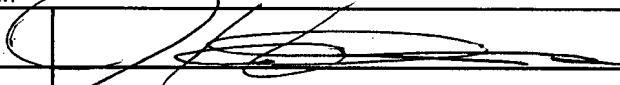
<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached  <input type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s)  <input type="checkbox"/> Extension of Time Request  <input type="checkbox"/> Express Abandonment Request  <input type="checkbox"/> Information Disclosure Statement  <input type="checkbox"/> Certified Copy of Priority Document(s)  <input type="checkbox"/> Reply to Missing Parts/ Incomplete Application <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers  <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation <input type="checkbox"/> Change of Correspondence Address  <input type="checkbox"/> Terminal Disclaimer  <input type="checkbox"/> Request for Refund  <input type="checkbox"/> CD, Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> After Allowance Communication to TC  <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences  <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief)  <input type="checkbox"/> Proprietary Information  <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below):  Request for Withdrawal as Attorney or Agent and Change of Correspondence Address.
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### SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm Name	Jay P. Hendrickson, Attorney at Law		
Signature			
Printed name	Jay P. Hendrickson		
Date	June 7, 2007	Reg. No.	37,147

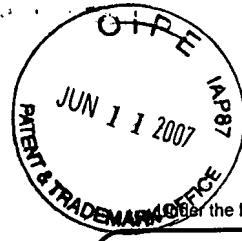
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**REQUEST FOR WITHDRAWAL  
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AND CHANGE OF  
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Application Number	09/696,538
Filing Date	10/25/2000
First Named Inventor	Timothy Redpath
Art Unit	3693
Examiner Name	Dass, Harish T.
Attorney Docket Number	

**To: Commissioner for Patents****P.O. Box 1450****Alexandria, VA 22313-1450**

Please withdraw me as attorney or agent for the above identified patent application, and

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 the attorneys/agents (with registration numbers) listed on the attached paper(s), or  
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NOTE: This box can only be checked when the power of attorney of record in the application is to all the practitioners associated with a customer number.

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Country	USA				
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Signature					
Name	Jay P. Hendrickson		Registration No.	37,147	
Date	June 7, 2007		Telephone No.	(415) 456-4116	

*NOTE: Withdrawal is effective when approved rather than when received. Unless there are at least 30 days between approval of withdrawal and the expiration date of a time period for response or possible extension period, the request to withdraw is normally disapproved.*

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